

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

- Declaration Submitted with Initial Filing
- Declaration Submitted after Initial filing (surcharge (37 CFR 1.16(e)) Required)

Attorney Docket	1171-201
First Named Inventor	Kamara
COMPLETE IF KNOWN	
Application Number	
Filing Date	April 4, 2001
Group Art Unit	2875
Examiner Name	Payne, S

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Jewelry With Battery Illuminated Medallion

(Title of the Invention)

the specification of which

- is attached hereto
- OR
- was filed on (MM/DD/YYYY) February 4, 2000 as United States Application Number or PCT International

Application Number 09498,523 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
			•	•
			•	•
			•	•
			•	•

- Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United states provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application Numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)
XXXXXX	00/00/00	

- Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

- Customer Number 30011
- OR
- Registered practitioner(s) name/registration number listed below



Name	Registration Number	Name	PATENT & TRADEMARK OFFICE Registration Number
Rochelle Lieberman, Esq.	39,276		

- Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number _____ OR Correspondence address below

Name	Lieberman & Brandsdorfer, LLC			
Address	12221 McDonald Chapel Drive			
Address				
City	Geithersburg	State	MD	Zip
Country	United States of America	Telephone	301-948-7775	Fax

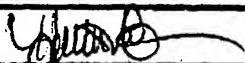
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:	<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle if any)		Family Name or Surname		
Michael A.		Kamara		
Inventor's Signature				Date 4-5-02
Residence: City	Sherman Oaks	State CA	Country USA	Citizenship US
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City	Sherman Oaks	State CA	Zip 91423	Country USA

- Additional inventors are being named on the Supplemental Additional Inventor(s) sheet(s) PTO/SB/02A Attached hereto.

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Supplemental Additional Inventor(s) Sheet PTO/SB/02A (3/97)

DECLARATION				ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> Of <u>3</u>			
Name of Additional Joint Inventor, if any:				<input checked="" type="radio"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Heather				Family Name or Surname Dadmanesh			
Inventor's Signature					Date	9/4/02	
Residence: City	Alexandria	State	VA	Country	22301	Citizenship	US
Post Office Address	101 Skyhill Rd. # 301						
Post Office Address							
City	Alexandria	State	VA	Zip	22314	Country	USA
Name of Additional Joint Inventor, if any:				<input checked="" type="radio"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Name of Additional Joint Inventor, if any:				<input checked="" type="radio"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature					Date		
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	